(b) the action taken in each case?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI A. RAJA): (a) and (b) Currently five Central Health Service doctors working in Government Hospitals of Delhi and 10 faculty members of All India Institute of Medical Sciences, New Delhi, have not returned and joined their duties after completing their permissible period of foreign assignments. Out of five Central Health Service doctors, four are facing departmental proceeding and fifth one whose tenure has completed on 5.3.2003, has been asked to join immediately. In so far as faculty members of All India Institute of Medical Sciences, New Delhi is concerned, disciplinary proceedings against 9 faculty members have been concluded. Remaining one faculty member has requested for grant of further extension of his assignment.

TB Infection among employees of TB Hospitals

36. SHRI SANTOSH BAGRODIA:
SHRIMATI AMBIKA SONI:

Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether Government have information on various TB Hospitals in the country;

(b) Whether Government are aware that even employees working in these Hospitals become TB patients; and

(c) If so, what steps Government are willing to take control and tackle this disease?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI A. RAJA): (a) and (b) Yes, Sir. However, there is no authentic data/information in India regarding TB among hospital staff. It is estimated that about 22 lakh new cases are occuring in the country every year of which about 10 lakh are sputum positive (infectious) cases.

(c) To control the disease, National TB Control Programme is in operation in the country since 1962. This could not achieve the desired results. Therefore, Revised National TB Control Programme, widely

Known as DOTS, which is a WHO recommended strategy, is being implemented in a phased manner, with the objective of achieving cure rate of 85% of new sputum positive cases and to detect at least 70% of such cases. Diagnosis by sputum microscopy instead of by X-Ray helps in detecting and curing infectious cases on priority. Facilities for diagnosis by sputum microscopy have been decentralized and strengthened. Drugs are provided under observation and patients are monitored so that they complete their treatment. Drugs are provided free of cost in patient-wise boxes.

The project districts have reported a cure rate of more than 80% which means more than 8 out of every 10 patients diagnosed and put on treatment under revised strategy are successfully treated. This is double that of the earlier programme.

To make the programme more accessible to larger segments of the population, and to supplement the Government efforts in this direction, emphasis is being given to also involve medical colleges, all general hospitals, private practitioners and NGOs in the programme.

DOTS coverage is being rapidly expanded in the country. From 20 million coverage in 1998, about 700 million population have been covered at present. It is envisaged to cover 850 million population by 2005 under the revised strategy.

Status of Health Interventions for Neglected Children

37. SHRI KALRAJ MISHRA:
DR. AKHILESH DAS:

Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether a seminar on the status of Health Interventions for neglected children was held in new Delhi in the first week of May this year;

(b) if so, whether the Director, All India Institute of Medical Sciences, New Delhi stressed that health care system for the disadvantaged was the need of the hour;

(c) whether Government have drawn out any national programme